File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073



LA ETHICS AND

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

2008 JAN 18 PM 1:40

FAGAN FOR CEDAR A			
	240ins	FORM	
IMPORTANT: Indicate by # type of committee you are reporting t	for: Z	DR-2	DISCLOSURE
(1) Statewide/Legislative/Judge Standing for Retention Candidate	e (2)State PAC (3)State Party	(Rev. 07/2007)	REPORT
(4) County Central Committee (5) County Candidate (6) City Candidate (8) County PAC (9) City PAC (10) School (10) City PAC (10) City P	andidate (7)School Board or Other Political ool Board or Other Political Subdivision PAC (For Office Use Or	ily
11) Local Ballot Issue		Comm. #	
CANDIDATE COMMITTEES ONLY: Candidate Name	5 10 15 1 05		
Candidate Name	Political Party (if applicable)		
Office Sought	District (f. O		
	District (if Senate or House)	Audited	
Late reports are subject to possible civil and criminal penalties.	Pursuant to Iowa Code sections 68B.32A(7) a	nd 68A.401(3), the ca	andidate, for a
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SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE S	IGNED
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I AM FILING A	REPORT FOR (1) ELECTION /(2)N		AR.
'(report date)	Indicate by # 🔼	j	
CHECK IF AMENDMENT TO REPORT DATED	Local	Committees, enter Da	te of Election
Check if this is final (termination) report and attach Nation	!		
Check if this is final (termination) report and attach Notic (You must continue to file reports until a DR-3 is fil	ا امما	ty & Local Committees.	, enter County in
	which	Election is held	
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

(Rev. 07/03)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

SCHEDULE

COMMITTEE NA	ME (Must be same as on State	ement of Organization)	_
FAGAN	FOR CEDAR	RAPIDS	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	T 55 5		
RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	ID#				INCOME
	CK#			\$	
01/05/01	ID#	BANKERS TRUST INT.		1,67	
· ` `		,			
02/06/07	CK#	BANKERS TRUSTINT		1 ,	
901	ID#	THURERS TRUSTILIVIA	 	1.79	
	CK#				
03/06/07	ID#	BANKERS TRUST INT.		1,56	
	CK#				
04/06/07		BANKERS TRYST INT.		1.73	L
, ,	ID#			10,70	
ATLANIAM	CK#	Realter no there to			
05/04/07	ID#	BANKERS TRUST INT.		1.57	
	CK#				
06/0407	ID#	BANKERS TRUST INT.		1.84	
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07/04/07	CK#	BAWKERS TRUST INT.		1.0	
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= 0/ /a H	CK#				
08/06/07	ID#	BANKERS TRUST INT		1,74	
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, ,	ID#			.,,,	
10/05/07	CK#	BANKEDS + DUCK + HALL		1	
10/00/1		BANKERS TRUST INT	SUB-TOTAL	1.63	
		TOTAL (%)		\$ 16.94	
		TOTAL (if last page	or this schedule)	\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of _____ (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF

COMMITTEE NAME	(Must be sa	ame as on Statement of Organization)	·
		CEDAR RAPIDS	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	4140111	
RECEIVED	(if applicable)	The second section of the second seco	TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(MM/DD/YR)	AND PAC CHECK NUMBER		(if applicable)	KECEIVED	FUND- RAISER
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SUB-TOTAL

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)